U.S. Patern and Trademark Office: U.S. Department of Constant Office: U.S. Department Office: U.S. Dep PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I (Column 1) (Cotumn 2) OTHER THAN SMALL ENTITY OR FOR SMALL ENTITY MUNUBER FILED BASIC FEE MIMBER EXTRA (3) CFA LISION RATE FEE <u>råte</u> FEE TOTAL CLAIMS (37 CFR 1.16(c)) OR INDEPENDENT CLAIMS (37 CFR 1.14(D)) crimus 20 · OR minus 3 . K 1 MIR TIPL & DEPENDENT CLASH PRESENT œ (37 CFR 1.15(4)) If the difference in column 1 is loss than zero, enter "O" in column 2 TOTAL OA CLAIMS AS AMENDED - PART II MIOTAL (Cotumn 1) (Column 2) (Cotumn 3) SMALL ENTITY OTHER THAN CLAIMS OR HICHEST REMAINING SMALL ENTITY AFTER AMENDMENT NUMBER PRESENT. PREVIOUSLY RATE ADDI-TIONAL EXTRA RATE PAID FOR ADDI-TIONAL You (NOVI NO IN FEE FEE (3) CFR 1.00 x . 25. 50. x :/00 : THE TERESENTATION OF MEATHER DEPENDENT CLADA (S) CFR 1. (S(C)) · VBO. +1360. TOTAL ADDL FEE a0O COMMO 1) TOTAL CR ADD'L FFF (Caluma 2) (Column 3) HIGHEST REMAINING NUMBER PREVIOUSLY PRESENT AFTER AMENDMENT RATE . ADDI-TIONAL FEE EXTRA RATE PAID FOR Total Of GFR 1.16(c) TIONAL : 120 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLASH (37 CFR 1.1568) 1 1 /00 = × 1200 OR · BO. +340. OR TOTAL ADDL FEE. TOTAL ADD1 FEE (Cotumn 2) CLAIMS REMAINING (Cotuden 3) HIGHEST NUMBER PREVIOUSLY PRESENT AFTER AMENDMENT RATE EXTRA RATE Total CIT CAR C. LOCAL TIONAL ADDI-TIONAL FEE PAID FOR END FEE a_0 Independent DI OFR 4.160/9 :25. ÖR .50.

FIRST PRESENTATION OF MURTIPLE DEPENDENT CLASM (37 CFR 1.18(d)

"If the entry in column 1 is lass then the entry in column? write 'V' in column 3.

"If the "Highest Number Previously Paid For' IN THIS SPACE is less then 20, emer "20".

The Highest Number Previously Paid For' IN THIS SPACE is less than 3, emer "20".

The Highest Number Previously Paid For' IN THIS SPACE is less than 3 emer "20".

The Highest Number Previously Paid For' (Total or in the Previous Paid For' (Total or in the Previous Paid For' (Total or in the Previous Paid For' (Tota

200

OR

OR

If you need assistence in completing the form, call 1-000-P TO-0199 and select option 2.